



PTO/SB/21 (08-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/760,003
		Filing Date	January 16, 2004
		First Named Inventor	David Solow-Cordero
		Art Unit	1614
		Examiner Name	Kwon, Brian Yong S.
Total Number of Pages in This Submission		Attorney Docket Number	061030-0056-US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none">• Return postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 50-0310.
PER THE PAIR SYSTEM, AN ASSOCIATE POWER OF ATTORNEY WAS RECEIVED BY THE PTO ON OCTOBER 17, 2005. PLEASE CHANGE THE CUSTOMER NUMBER TO 43850 (AND CORRESPONDENCE ADDRESS TO THE CORRESPONDING PALO ALTO ADDRESS).		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Morgan, Lewis & Bockius LLP Alok Goel Reg. No. 51,745
Signature	
Date	June 23, 2006

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Kathryn A. Degliantoni		
Signature		Date	June 23, 2006